

## REQUEST FOR COURTCALL TELEPHONIC APPEARANCE

ATTORNEY OF RECORD (Name and Address): Attorney Name: Firm Name: TELEPHONE NO: (    ) FAX NO: (    )  State Bar No. _____  ATTORNEY FOR (Name):	<b>**DO NOT FILE WITH COURT**</b>  <b>COMPLETELY FILL OUT/CORRECT FORM BEFORE SUBMITTING TOCOURTCALL!</b>
<b>FAIRFAX COUNTY CIRCUIT COURT</b>	Our Tax ID#: 95-4568415
Case Name:	CASE NUMBER:  DEPARTMENT:  DATE :  TIME:  NATURE OF HEARING:
<b>REQUEST FOR COURTCALL TELEPHONIC APPEARANCE</b>	

1. \_\_\_\_\_ (Name of specific attorney appearing telephonically) requests a CourtCall telephonic calendar appearance at the above referenced proceeding and agrees to provisions of the Rule/Order/Procedure Re: CourtCall Telephonic Appearances. I UNDERSTAND THAT I DIAL INTO THE CALL FIVE MINUTES BEFORE ITS SCHEDULED TIME. **COURTCALL DOES NOT DIAL OUT TO ME.**
  
2. Not later than 4:00 PM on the Thursday prior to your Friday Motion hearing, a copy of this document was served on all other parties and faxed to CourtCall, LLC, Telephonic Appearance Program Administrator at (310) 743-1850 OR (888) 88-FAXIN.
  
3. The non-refundable CourtCall Appearance Fee in the sum of \$50.00 is paid as follows:  
  
 \_\_\_ Check (copy attached-write case name/case number on check-and faxed to CourtCall at (310) 743-1850 of (888) 88\_FAXIN) payable to Telephonic Hearing Account and original mailed to CourtCall at 6383 Arizona Circle, Los Angeles, CA 90045, telephone (310) 342-0888 or (888) 88-COURT. **INDIVIDUALS REPRESENTING THEMSELVES MUST PAY BY CREDIT CARD!!**  
  
 \_\_\_ Charged to CourtCall Debit Account No.: \_\_\_\_\_  
  
 \_\_\_ Charged to VISA, MasterCard or American Express:

<b><u>TO BE COMPLETED ONLY ON THE COPY SUBMITTED TO CourtCall, LLC:</u></b>
Credit Card Number: _____ Expiration Date: _____ To pay by credit card, the copy of this form submitted to CourtCall, LLC, must be signed by the person whose card is to be charged and must be <b>faxed</b> to CourtCall, LLC at (310) 743-1850 or (888) 88-FAXIN with the above credit card information completed. The signature below constitutes authorization to charge the above referenced credit card. Type Name _____ Signature _____

4. **Call CourtCall if you do not receive a fax Confirmation prior to your hearing.** WITHOUT A WRITTEN CONFIRMATION YOU ARE NOT ON THE COURTCALL CALENDAR AND MAY BE PRECLUDED FROM APPEARING TELEPHONICALLY! COURTCALL'S LIABILITY CONCERNING THIS TELEPHONIC APPEARANCE IS LIMITED TO THE FEE PAID TO COURTCALL.
  
5. MY SIGNATURE ON THIS DOCUMENT SERVES AS CONSENT FOR COURTCALL TO CONTINUE TO FAX (AT THE FAX NUMBER LISTED ABOVE UNDER "ATTORNEY OF RECORD") OR EMAIL NOTICES TO ME OR MY FIRM ADVISING OF UPCOMING APPEARANCES AND/OR OTHER OFFERINGS FROM COURTCALL UNTIL I OR MY FIRM ADVISES COURTCALL OTHERWISE.

Dated: \_\_\_\_\_

\_\_\_\_\_  
Signature